

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form
(CRF)?:: No

Number of copies of CRF::

Title:: TREATMENT OF ATTENTION DEFICIT HYPERACTIVITY
DISORDER

Attorney Docket Number:: 01464.US1

Request for Early
Publication?:: No

Request for
Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Application Data Sheet

Application Information

Small Entity?::

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type:: No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Bruce
Middle Name::	Nelson
Family Name::	Rogers
Name Suffix::	
City of Residence::	Mystic
State or Province of Residence::	Connecticut
Country of Residence::	USA
Street of mailing address::	114 Ledgeland Drive
City of mailing address::	Mystic
State or Province of mailing address::	Connecticut
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49024
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	David
Middle Name::	W.
Family Name::	Piotrowski
Name Suffix::	
City of Residence::	Groton Long Pointe
State or Province of Residence::	Connecticut
Country of Residence::	USA
Street of mailing address::	21 Tautog Street
City of mailing address::	Groton Long Pointe
State or Province of mailing address::	Connecticut
Country of mailing address::	USA
Postal or Zip Code of mailing address::	06340

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Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Vincent
Middle Name::	Edward
Family Name::	Groppi
Name Suffix::	Jr.
City of Residence::	Kalamazoo
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	318 Sprague Avenue
City of mailing address::	Kalamazoo
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49006
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Eric
Middle Name::	Jon
Family Name::	Jacobsen
Name Suffix::	
City of Residence::	Chesterfield
State or Province of Residence::	Missouri
Country of Residence::	USA
Street of mailing address::	1503 Lace Bark Court
City of mailing address::	Chesterfield
State or Province of mailing address::	Missouri
Country of mailing address::	USA
Postal or Zip Code of mailing address::	63017

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Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Jason
Middle Name::	K.
Family Name::	Myers
Name Suffix::	
City of Residence::	Kalamazoo
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	1028 Homecrest Avenue
City of mailing address::	Kalamazoo
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49001
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Daniel
Middle Name::	Patrick
Family Name::	Walker
Name Suffix::	
City of Residence::	Noank
State or Province of Residence::	Connecticut
Country of Residence::	USA
Street of mailing address::	37 Nobel Avenue
City of mailing address::	Noank
State or Province of mailing address::	Connecticut
Country of mailing address::	USA
Postal or Zip Code of mailing address::	06340

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Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Donn
Middle Name:: G.
Family Name:: Wishka
Name Suffix::
City of Residence:: Groton Long Point
State or Province of Residence:: Connecticut
Country of Residence:: USA
Street of mailing address:: 18 Atlantic Avenue
City of mailing address:: Groton Long Point
State or Province of mailing address:: Connecticut
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 06340
Applicant Authority Type::
Primary Citizenship Country::
Status::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 25533
Name:: Pharmacia & Upjohn Company
Street of mailing address:: Global Intellectual Property
301 Henrietta Street
City of mailing address:: Kalamazoo
State or Province of mailing address:: MI
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 49007
Phone number:: (269) 833-9500
Fax Number:: (269) 833 2316
E-Mail address::

